

TUDOR OAKS HEALTH CENTER

S77 W12929 MCSHANE DR

MUSKEGO 53150 Phone:(414) 529-0100

Operated from 1/1 To 12/31 Days of Operation: 366

Operate in Conjunction with Hospital? No

Number of Beds Set Up and Staffed (12/31/04): 61

Total Licensed Bed Capacity (12/31/04): 61

Number of Residents on 12/31/04: 61

Ownership:

Highest Level License:

Operate in Conjunction with CBRF?

Title 18 (Medicare) Certified? Yes

Title 19 (Medicaid) Certified? Yes

Average Daily Census: 58

Nonprofit Church/Corporation

Skilled

No

Yes

Yes

58

Services Provided to Non-Residents		Age, Gender, and Primary Diagnosis of Residents (12/31/04)				Length of Stay (12/31/04)		%
Home Health Care	No	Primary Diagnosis	%	Age Groups	%	Less Than 1 Year		37.7
Supp. Home Care-Personal Care	Yes					1 - 4 Years		44.3
Supp. Home Care-Household Services	Yes	Developmental Disabilities	0.0	Under 65	0.0	More Than 4 Years		18.0
Day Services	No	Mental Illness (Org./Psy)	59.0	65 - 74	3.3			----
Respite Care	No	Mental Illness (Other)	11.5	75 - 84	31.1			100.0
Adult Day Care	No	Alcohol & Other Drug Abuse	0.0	85 - 94	47.5	*****		
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic	0.0	95 & Over	18.0	Full-Time Equivalent		
Congregate Meals	Yes	Cancer	0.0		----	Nursing Staff per 100 Residents		
Home Delivered Meals	Yes	Fractures	3.3		100.0	(12/31/04)		
Other Meals	No	Cardiovascular	1.6	65 & Over	100.0	-----		
Transportation	Yes	Cerebrovascular	9.8		----	RNs		10.7
Referral Service	No	Diabetes	0.0	Gender	%	LPNs		7.0
Other Services	Yes	Respiratory	0.0		----	Nursing Assistants,		
Provide Day Programming for		Other Medical Conditions	14.8	Male	24.6	Aides, & Orderlies		
Mentally Ill	No		----	Female	75.4			35.1
Provide Day Programming for			100.0		----	-----		
Developmentally Disabled	No				100.0	-----		

Method of Reimbursement

Medicare (Title 18)			Medicaid (Title 19)			Other			Private Pay			Family Care		Managed Care						
Level of Care	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	Total Resi- dents	% Of All
Int. Skilled Care	0	0.0	0	1	4.3	147	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	1	1.6
Skilled Care	9	100.0	340	20	87.0	125	0	0.0	0	28	96.6	220	0	0.0	0	0	0.0	0	57	93.4
Intermediate	---	---	---	2	8.7	104	0	0.0	0	1	3.4	210	0	0.0	0	0	0.0	0	3	4.9
Limited Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Personal Care	---	---	---	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Residential Care	---	---	---	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Dev. Disabled	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Traumatic Brain Inj	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Ventilator-Dependent	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Total	9	100.0		23	100.0		0	0.0		29	100.0		0	0.0		0	0.0		61	100.0

Admissions, Discharges, and Deaths During Reporting Period		Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/04				

Percent Admissions from:		Activities of	%	% Needing Assistance of	% Totally	Total
		Daily Living (ADL)	Independent	One Or Two Staff	Dependent	Number of Residents
Private Home/No Home Health	1.4	Bathing	8.2	77.0	14.8	61
Private Home/With Home Health	6.8	Dressing	14.8	67.2	18.0	61
Other Nursing Homes	4.1	Transferring	26.2	50.8	23.0	61
Acute Care Hospitals	85.1	Toilet Use	16.4	65.6	18.0	61
Psych. Hosp.-MR/DD Facilities	0.0	Eating	63.9	24.6	11.5	61
Rehabilitation Hospitals	1.4	*****				
Other Locations	1.4					
Total Number of Admissions	74	Continence	%	Special Treatments	%	
Percent Discharges To:		Indwelling Or External Catheter	9.8	Receiving Respiratory Care	8.2	
Private Home/No Home Health	15.1	Occ/Freq. Incontinent of Bladder	65.6	Receiving Tracheostomy Care	0.0	
Private Home/With Home Health	27.4	Occ/Freq. Incontinent of Bowel	47.5	Receiving Suctioning	0.0	
Other Nursing Homes	2.7			Receiving Ostomy Care	3.3	
Acute Care Hospitals	19.2	Mobility		Receiving Tube Feeding	0.0	
Psych. Hosp.-MR/DD Facilities	0.0	Physically Restrained	0.0	Receiving Mechanically Altered Diets	34.4	
Rehabilitation Hospitals	0.0					
Other Locations	2.7	Skin Care		Other Resident Characteristics		
Deaths	32.9	With Pressure Sores	9.8	Have Advance Directives	100.0	
Total Number of Discharges		With Rashes	1.6	Medications		
(Including Deaths)	73			Receiving Psychoactive Drugs	65.6	

Selected Statistics: This Facility Compared to All Similar Milwaukee Metropolitan Area Facilities & Compared to All Facilities

	This Facility %	Ownership: Nonprofit %	Peer Group Ratio	Bed Size: 50-99 %	Peer Group Ratio	Licensure: Skilled %	Peer Group Ratio	All Facilities %	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	95.1	87.4	1.09	88.2	1.08	87.3	1.09	88.8	1.07
Current Residents from In-County	82.0	86.8	0.94	88.5	0.93	85.8	0.95	77.4	1.06
Admissions from In-County, Still Residing	24.3	21.8	1.12	21.6	1.13	20.1	1.21	19.4	1.25
Admissions/Average Daily Census	127.6	159.1	0.80	187.2	0.68	173.5	0.74	146.5	0.87
Discharges/Average Daily Census	125.9	159.6	0.79	182.1	0.69	174.4	0.72	148.0	0.85
Discharges To Private Residence/Average Daily Census	53.4	63.2	0.85	76.7	0.70	70.3	0.76	66.9	0.80
Residents Receiving Skilled Care	95.1	96.1	0.99	96.7	0.98	95.8	0.99	89.9	1.06
Residents Aged 65 and Older	100	96.5	1.04	89.4	1.12	90.7	1.10	87.9	1.14
Title 19 (Medicaid) Funded Residents	37.7	50.4	0.75	48.4	0.78	56.7	0.67	66.1	0.57
Private Pay Funded Residents	47.5	33.2	1.43	31.2	1.52	23.3	2.04	20.6	2.31
Developmentally Disabled Residents	0.0	0.5	0.00	0.2	0.00	0.9	0.00	6.0	0.00
Mentally Ill Residents	70.5	33.9	2.08	34.7	2.03	32.5	2.17	33.6	2.10
General Medical Service Residents	14.8	26.1	0.56	23.5	0.63	24.0	0.61	21.1	0.70
Impaired ADL (Mean)	46.2	51.2	0.90	50.4	0.92	51.7	0.89	49.4	0.94
Psychological Problems	65.6	62.3	1.05	58.0	1.13	56.2	1.17	57.7	1.14
Nursing Care Required (Mean)	7.2	7.1	1.02	7.3	0.99	7.7	0.93	7.4	0.97